PART B - FEE(S) TRANSMITTAL

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THOUSAND O	AKS, CA 91360			Joan	Harriman	(Depositor's name)
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APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR AT	TORNEY DOCKET NO.	CONFIRMATION NO.
10/655,904	09/05/2003		James D. Parsons		378-21-034	7685
TITLE OF INVENTION: ACOUSTIC ABSORPTION RADIATION SENSING IN SIC 12/18/2006 CNGUYEN1 00000015 10655904						
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APPLN. TYPE	YES	\$700	\$300	\$0	\$1000	02/27/2007
nonprovisional			T	٦	-	
EXAMINER ART UNIT		CLASS-SUBCLASS				
GABOR, OTILIA 2884 250-339050 1. Change of correspondence address or indication of "Fee Address" (37 2. For printing on the patent front page, list						
CFR 1.363). Change of corresp: Address form PTO/SI "Fee Address" ind PTO/SB/47; Rev 03-0	ondence address (or Cha B/122) attached. lication (or "Fee Address)2 or more recent) attach	inge of Correspondence	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
Number is required.		A TO BE PRINTED ON	l			
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Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🖾 Corporation or other private group entity 🗀 Government						
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Advance Order - # of Copies10						
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